

SURI MUNICIPALITY: BIRBHUM

Suri-731101, Birbhum, W.B.

e-mail: suri.chairman@gmail.com

Memo No. 2216 / S.M.

Date: 08.1.24.

From
The Chairman,
Suri Municipality, Birbhum

To

1. The District Magistrate, Birbhum,
Suri, Birbhum.
2. The Chief Medical Officer Of Health, Birbhum.
3. The Sub-Divisional Magistrate and Sub-Divisional Officer, Sadar, Suri Birbhum
4. The Block Development Officer- Suri I block, Suri II Block, Md. Bazar Block, Sainthia Block.

Sub: Publication of advertisement for engagement of HHW


Sir,

Kindly publish the advertisement for engagement of HHW under Suri Municipality along with copy of application format in your office notice board.

Encl: As stated .

Memo No. 2216/1 SM


08.1.24
Date:


Chairman
Suri Municipality, Birbhum
Chairman
Suri Municipality
SURI :: BIRBHUM

Copy forwarded to :

The DIO, NIC, Birbhum, Suri, Birbhum, with a request to publish the advertisement for engagement of HHW under Suri Municipality along with copy of application format in the website of NIC, Birbhum.




Chairman
Suri Municipality, Birbhum

Chairman
Suri Municipality
SURI :: BIRBHUM

SURI MUNICIPALITY: BIRBHUM
P.O. – SURI, DIST- BIRBHUM, PIN-731101
NOTIFICATION NO.- 01/2024

Memo No. 2206 /SM

Date: 08.01.2024

Applications are invited from eligible candidates for the post of HHW under Suri Municipality on and from 11.01.2024. Last date of submitting the application physically is 01.02.2024. Hard Copy of the application should be dropped in a DROP BOX which will be kept near Head-clerk of this office.

Eligibility:

1. The Candidate must be resident from the same ULB.
2. Must be female in the age group of 30-40 years as on 01.01.2024.
3. Should be married/ divorced/ widow.
4. Minimum Madhyamik pass or equivalent examination. Candidates having higher qualification are also eligible. However, in case of candidates possessing higher qualification, only marks obtained in Madhyamik or equivalent examination will be considered. For calculation of the marks obtained in the Secondary Examination (Madhyamik or equivalent), the aggregate is to be considered (excluding the marks obtained in the additional paper).
5. Weightage given 90% of the marks obtained in Secondary Education and 10 % on interview.

Documents to be submitted / shown mandatorily by the applicant:

6. Proof of residence (Aadhaar Card / Voter ID/ Ration Card).
7. Original Mark sheet of Madhyamik or equivalent examination as applicable. (Photocopy to be attached with the application, Original mark sheet will be seen during interview)
8. Proof of Age as per Admit card of Secondary Education.

Application form is attached herewith. Candidate should download this application form from Website of Suri Municipality or from website of DM, Birbhumi fill up it and submit the application form physically along with photocopy of relevant documents in a sealed envelope in the drop box at the premises of Suri Municipality.

Encl: Form of application.


Chairman
Suri Municipality
Chairman
Suri Municipality
SURI :: BIRBHUM

Application Form

Application No.
(For Office Use Only)

PLEASE FILL UP THE APPLICATION IN CAPITAL LETTER IN (Except
Signature in CAPITAL LETTER)

Advertisement No. 01/2024

Date 08.01.2024

PASTE (Do not Pin or
Staple here). Paste
recent pass port size
colour photograph of
size 3.5 cm X 3.5 cm. The
Colour photograph
should not be more than
3 months old.

Please put your signature
across the photograph

Application for the post of Honorary Health Worker (HHW)

1. Name (In Capital Letter) :

FIRST NAME:

MIDDLE NAME:

SURNAME:

2. Father's / Husband's Name (In Capital Letter) :

3) DATE OF BIRTH (DD/MM/YYYY)

4) Age as on 01.01.2023 Years Months

5) Marital Status (Tick in appropriate box): Married Divorced Widow

6) Nationality:

7) Address :

7.1. PERMANENT ADDRESS (In Capital Letter) :

P.O :

Town / City :

Municipality : Ward No:

District :

State :

Pin code :

12) Language Known: (PLEASE TICK ✓)

Sl. No.	Language	WRITING	READING	SPEAKING

13) Check List of documents: (PLEASE TICK ✓ IN THE BOX)

Sl. No.	Documents	Y/N	No. of documents enclosed (Photocopies)
1.	Proof of age (Madhyamik Admit card)		
2.	Proof of Academic Qualification		
3.	Proof of residence (Aadhaar Card/Voter Card/Ration Card)		
4.	Caste Certificate		
5.	Others i) For married candidate – Marriage Certificate / Voter Card / Ration Card / Aadhaar Card mentioning the husband name ii) For widow candidate – Death Certificate of husband iii) For divorced candidate – Court order for divorced, if any		

Declaration:

I hereby declare that I have carefully read the conditions of eligibility mentioned in the advertisement. These conditions are acceptable to me and I fulfill these conditions. The details mentioned in the Application are true and I shall furnish the necessary documents in original whenever required.

If any information/ details found to be incorrect / false at any stage of the selection process or if any fact found to have been concealed by me or detected even after the appointment, my engagement likely to be terminated.

Date:

Place:

Full Signature of the Candidate